

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS           | ID NO. | DATE     |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION         | <i>[Signature]</i> |        |          |
| O.I.P.E. CLASSIFIER       | <i>[Signature]</i> |        | 11-19-01 |
| FORMALITY REVIEW          | <i>[Signature]</i> |        |          |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> |        |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal -  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE C

| Claim          | Date   |
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| Final Original |        |
| 1              | 4/8/01 |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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